



Patient information

Maternity Information Leaflet Looking after your skin

A guide to help prevent pressure damage in labour and the postnatal period

You will soon be or are focusing on the arrival of your baby; this leaflet aims to provide you with information to help protect your skin from pressure ulcers

What is a pressure ulcer?

A pressure ulcer can affect anyone of any age, it is a localised injury to the skin and/or underlying tissue, usually over a bony prominence, as a result of pressure, or pressure in combination with shear. Pressure ulcers may cause pain and may increase the length of time you spend in hospital.

What causes pressure ulcers?

Pressure ulcers can be caused by:

- **Pressure:** weight of the body pressing on skin caused by immobility
- **Shearing:** when layers of skin slide over another surface
- **Friction:** rubbing of the skin
- **Moisture:** caused by sweat, your waters (once broken) or blood loss

Pressure

Body weight can compress the skin and other tissues, certain sitting/lying positions can increase this compression. The blood supply to the area gets damaged, which in turn causes tissue damage. There are various pressure points on the body, these include back of heels, shoulders, back of spine, buttocks (most common), toes, elbows and ears.

How can this affect you in labour

Pressure can come from sitting/lying in one position for lengthy periods.

Restlessness in bed can result in friction/shearing of the skin.

Having an epidural or spinal can make it harder for you to tell if an area is becoming sore. It can also make it difficult for you to move.

Moisture can occur when your “waters” break.

If you require ‘a drip’ in labour or a urinary catheter these tubes may cause you to be reluctant to move

How can this affect you once your baby is born?

Recovering from an epidural or spinal can increase your risk due to continued immobility for a period of time once your baby has been born

Particularly following a caesarean section, your sensation and immobility may prevent you knowing you are sore or requiring a pad change

Pain may cause you to be reluctant to move

You can help by:

- Keeping as mobile as possible before labour, during and after the birth of your baby
- If you plan on or have had an epidural, it is important to move regularly, ideally every 2 hours (minimum). These do not need to be big movements, changing the position of the bed or a slight tilt to the side can make a difference.
- Change pads regularly to reduce the moisture risk. Your midwife can support you with this, and may prompt you if you have little or no sensation.
- Mobilise as soon as safe to do so (your midwife can guide you with this) following your birth. This will help to relieve the pressure and encourage circulation. You can do this even if you have a urinary catheter in place.
- Maintain hydration and a good diet.

Your midwife will help by:

- Carrying out regular assessments during your stay to establish if you are at risk of developing a pressure ulcer, and will advise you accordingly.

- Encourage and support you to mobilise and/or change position.
- Will help to change your pads and bedding regularly during labour and after the birth of your baby.
- To prevent moisture damage caused by skin contact with your waters or blood loss your midwife will offer you a barrier cream such as Medihoney, if you need support with application your midwife will be there for you.
- If you have a urine catheter, your midwife will check that you are not sitting on the tube which may cause pressure damage if there is prolonged contact.

Am I likely to get a pressure ulcer?

To reassure you, your risk is small.

With greater awareness of the importance to remain as active as possible or to ensure you regularly change position if mobility is reduced, and look after your skin, you will help us to help you prevent pressure damage occurring during your stay.

Self-assessment for skin damage

If you wish, your midwife can teach you how to inspect your own skin for signs of damage. Look or feel for pink / red changes, abrasions, heat, blisters, shiny patches and hard, swollen or painful areas.

If you notice any of these warning signs, inform your midwife immediately.

Remember

- Moving whilst you are confined to bed is very important. The advice in this leaflet will help to minimise the risk of damage to your skin.
- Frequent changes of position will relieve pressure on your skin.
- Ask a midwife if you would like more information — we are always happy to help